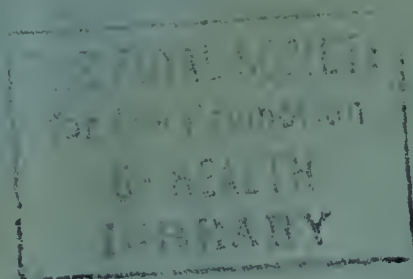


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SOUTH PACIFIC HEALTH SERVICE

INSPECTOR-GENERAL'S
REPORT

1964-1965



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REPORT

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I. INTRODUCTION.

This report covers the calendar and financial years 1st January, 1964, to 31st December, 1965, and records matters of policy and administration connected with the South Pacific Health Service and reviews activities in the field of health which have taken place in the participating territories. The report has been approved by members of the South Pacific Board of Health and is now submitted for the information of the administrations participating in the Service.

II. CONSTITUTION.

The South Pacific Health Service was first established under an Agreement between the Government of New Zealand (in respect of New Zealand Island Territories, including Western Samoa), the Government of Fiji and the Western Pacific High Commission and received formal recognition on 7th September, 1946. The Kingdom of Tonga joined the Service on 1st January, 1947. This Agreement continued in force until 11th June, 1951, when a new Agreement was authorised by the Administrations concerned covering the period up to 30th September, 1954. By mutual consent this Agreement was again extended until the end of 1955. In June, 1955, a meeting was convened to review the Service as a whole. At this meeting it was decided, unanimously, that the Agreement should continue with certain amendments, the chief of which being the inclusion of representatives from the Governments of Western Samoa and the Kingdom of Tonga as full members of the Board. The new Agreement was signed on the 10th January 1958. An Agreement for the continued operation of the Service was signed in 1964.

III. ADMINISTRATION.

SOUTH PACIFIC HEALTH BOARD.

Under the terms of the Agreement, the South Pacific Health Board is made up of:-

The Inspector-General (Chairman).

The Director-General, Department of Health,
New Zealand (or his representative).

The Director, Division of Nursing, Department of
Health, New Zealand (or her representative).

The Director of Medical Services, Fiji, or (whenever
the same person holds office as Inspector-
General and as Director of Medical Services,
Fiji) a person nominated by the Governor of
Fiji.

2.

A person nominated by the High Commissioner for the Western Pacific.

A person nominated by the Premier of the Kingdom of Tonga.

A person nominated by the Government of Western Samoa.

The Board has met twice during the period under review. In July, 1964, the meeting was held in Suva, Fiji. Those present were:-

Dr. D. W. Bookless, Acting Inspector-General (Chairman).

Dr. G. O. L. Dempster, Deputy Director, Division of Hospitals, Department of Health, Wellington, New Zealand.

Miss A. Orbell, Director, Division of Nursing Department of Health, Wellington, New Zealand.

Mr. K. R. Bain, Secretary, Social Services, Fiji Government Representative.

Dr. J. C. Thieme, Director of Health, Western Samoa.

Dr. R. G. Greenhough, Representative of the Western Pacific High Commission Territories.

In July, 1965, the meeting was held in Apia, Western Samoa, those present were:-

Dr. C. H. Gurd, O.B.E., Inspector-General (Chairman).

Dr. G. O. L. Dempster, Deputy Director, Division of Hospitals, Department of Health, Wellington, New Zealand.

Miss D. T. Pedersen, Assistant Director, Division of Nursing, Department of Health, Wellington, New Zealand.

Mr. K. R. Bain, Secretary, Social Services, Fiji Government Representative.

Dr. S. Tapa, Chief Medical Officer, Tonga.

Dr. J. C. Thieme, Director of Health, Apia, Western Samoa.

The Inspector-General was requested to also represent the views of the Tongan Government as the Tongan Government was unable to send a representative in 1964. The Inspector-General also represented Western Pacific High Commission in 1965.

A joint meeting with the Advisory Board of the Fiji School of Medicine was held on the 15th July, 1964, immediately following the meeting of the South Pacific Health Board.

The minutes of these meetings have been published and circulated to participating Governments and other interested bodies.

EXECUTIVE.

The Inspector-General continued to hold also the appointment of Director of Medical Services, Fiji. This arrangement is desirable because of the close connection between many aspects of the work of the South Pacific Health Service and that of the Fiji Medical Service. This is particularly so in the field of basic and post-graduate medical and nursing education and in the production of health education material. It also enables the participating territories to obtain assistance more easily with staffing, visits by specialists, and arrangements for the care of individual cases.

The main function of the Service however is to assist participating territories with their staffing difficulties and to advise territories on medical and health matters.

In recent years, special attention has been paid to the production of health education material specifically designed for the people and the needs of the area.

The Service also enables the territories to maintain a close liaison with the medical and nursing educational facilities available in Fiji and the links which are being forged between these establishments and other centres in New Zealand and to a lesser extent in Australia and Hawaii.

FINANCE.

In accordance with the Agreement, draft estimates of expenditure are prepared each year by the Inspector-General and considered by the Board at its annual meeting. The estimates are then submitted to the participating territories for approval.

The system of accounting is based on the financial regulations of Fiji. Provision is made under the appropriate expenditure and revenue heads in the Fiji Estimates for all expenditure to be met in the first instance by the Fiji Treasury and reimbursement made subsequently by the participating Governments.

The proportionate payments made by the participating Governments are:-

Fiji	..	..	..	..	..	..	seven-sixteenths.
Western Pacific High Commission	..	..	..	..	..	..	one-quarter.
New Zealand	..	..	..	..	..	..	one-eighth.
Western Samoa..	..	..	..	..	..	..	one-eighth.
Tonga	..	..	..	..	..	..	one-sixteenth.

The estimated and actual expenditure of the Service over the last nineteen years is shown below:-

<u>Year</u>					<u>Estimated</u> £F	<u>Net</u> £F
1946	..	..	..	..	3,793	3,470
1947	..	..	..	..	3,834	3,463
1948	..	..	..	..	3,618	2,322
1949	..	..	..	..	3,500	3,062
1950	..	..	..	..	3,600	3,303
1951	..	..	..	..	4,294	3,628
1952	..	..	..	..	4,536	4,258
1953	..	..	..	..	5,687	4,982
1954	..	..	..	..	5,687	5,634
1955	..	..	..	..	6,356	5,605
1956	..	..	..	..	6,258	6,048
1957	..	..	..	..	7,898	5,786
1958	..	..	..	..	8,457	6,448
1959	..	..	..	..	9,921	7,262
1960	..	..	..	..	9,446	7,491
1961	..	..	..	..	8,738	5,876
1962	..	..	..	..	8,917	5,818
1963	..	..	..	..	9,849	5,959
1964	..	..	..	..	9,194	7,461

<u>Year</u>				<u>Estimated</u> £F	<u>Net</u> £F
1965	..	..	..	9,070	6,692
1966	..	..	..	10,094	

IV. ESTABLISHMENT.

The Board is responsible, under the Agreement for maintaining a "pool" of Medical Officers sufficient in number to provide the participating Administrations with staff for adequate health services. However this did not prove to be a practical possibility and a new system was introduced as reported in the 1960-1961 report. Nevertheless the South Pacific Health Service still does everything possible to assist territories with staffing difficulties whether these are of short- or long-term duration.

The Fiji Medical establishment in 1965 was as here-under:-

1. Medical and Administrative Section -

Director of Medical Services	1
Deputy Director of Medical Services.. .. .	1
Assistant Director of Medical Services	1
Secretary	1
Senior Medical Officers.. .. .	3
Physician Specialist	1
Surgeon Specialists (2), Surgeon (1)	3
Ophthalmologist	1
Radiologist (1), Pathologist (1)	2
Anaesthetist	1
Gynaecologist/Obstetrician	1
Chest Physician	1
Paediatrician	1
Psychiatrist	1
Medical Officers Class I (18), Class II (20), Class III (111)	149
Senior Dental Officer (1), Dental Officer Class I (1)	2

Dental Officers Class II	..	..	..	..	18
Physiotherapists ..	..	..	..	..	2

2. Nursing Section -

Nursing Superintendent ..	..	..	..	..	1
Matrons and Assistant Matrons..	..	..	..	..	5
Sisters-in-Charge ..	..	..	..	..	4
Nursing Sisters (52), Health Sisters (12) ..	..	..	..	..	64
Principal (1), Tutors (7), Nursing School..	..	..	..	..	8
Junior Sisters (58), Nurses (450) ..	..	..	..	..	508

3. Technical Section -

Laboratory Superintendent ..	..	..	..	..	1
Chief Health Inspector (1), Health Inspectors (11) ..	..	..	..	..	12
Assistant Inspectors (Health and Mosquito)	..	..	..	..	64
Laboratory Technicians ..	..	..	..	..	17
Chief Pharmacist and Controller of Medical Supplies ..	..	..	..	..	1
Pharmacists (2), Pharmacists Class II and Junior Pharmacists (8) ..	..	..	..	..	10
Radiographers (4), Junior Radiographers (9)	..	..	..	..	13
Supervising Dietitian ..	..	..	..	..	1
Dental Hygienists (11), Dental Mechanics (3)	..	..	..	..	14
Junior Physiotherapists..	..	..	..	..	2

4. Executive and Clerical Section -

Departmental Accountant ..	..	..	..	..	1
Higher Executive Officers (3), Executive Officers (5) ..	..	..	..	..	8
Clerical Staff ..	..	..	..	..	56

5. Supervisory Section -

Head Attendant, St. Giles' Hospital	1
Assistant Head Attendant (1), Orderlies, St. Giles' Hospital (41)	42
Caretaker, Makuluva Island	1
Storekeepers and Storemen	11
Junior Dietitians and Housekeepers (10), Chief Cooks (5), Laundry Supervisors (4), Headseamstresses (2)	21
Receptionist	1

6. Fiji School of Medicine -

Principal	1
Medical Officers	2
Anatomy and Surgery Lecturer	1
Dental Officers	2
Senior Lecturers (4), Lecturers (2)	6
Medical Officer Class III	1
Health Instructor	1
Executive Officer (1), Clerical Staff (3)	4
Laboratory Attendant (3), Chief Cook (1), Housekeeper (1), Subordinate Staff (14)	19

7. Fiji Leprosy Hospital -

Medical Officer Class II	1
Higher Executive Officer (1), Clerk (1)	2
Overseer (1), Ship's Master (1), School Teachers (2), Police (5)	9
Nursing Sisters (23), Assistant Nursing Sisters (11)	34
Subordinate Staff	41

8. Central Medical Research Library -

Assistant Librarian	1
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(a) Promotions -

Dr. D. W. Beckett, Senior Medical Officer, was promoted to Assistant Director of Medical Services (Health) with effect from 1st January, 1964.

Dr. S. C. Ramrakha was promoted to Surgeon with effect from 1st January, 1964.

Dr. K. J. Gilchrist, Anatomy and Surgery Lecturer, was promoted to Principal, Fiji School of Medicine, with effect from 30th June, 1964.

(b) Acting Appointments -

Dr. D. W. Bookless, Deputy Director of Medical Services, acted as Director of Medical Services and Inspector-General, South Pacific Health Service, from 3rd April to 28th August, 1964, during the absence on leave of the Director of Medical Services and Inspector-General, South Pacific Health Service.

Dr. G. Y. McCririck, Senior Medical Officer, acted as Deputy Director of Medical Services from 3rd April to 28th August, 1964, during the period Dr. D. W. Bookless acted as Director of Medical Services and Inspector-General, South Pacific Health Service.

(c) New Appointments -

Dr. M. E. J. Hackett was appointed Lecturer in Surgery, Fiji School of Medicine, with effect from 9th September, 1964.

Dr. D. F. Macgregor was appointed Psychiatrist, Fiji, with effect from 4th November, 1964.

Dr. I. D. Porteous was appointed Medical Officer Class I, South Pacific Health Service, with effect from 11th March, 1965, and posted to Fiji.

Dr. G. H. Ree was appointed Medical Officer Class I, South Pacific Health Service, with effect from 19th May, 1965 and posted to Fiji.

Dr. G. Rutledge was appointed Paediatrician, Fiji, with effect from 6th June, 1965.

Dr. D. N. Myers was appointed Medical Officer Class I, South Pacific Health Service, with effect from 23rd July, 1965 and posted to Fiji.

Dr. R. M. Buchanan was appointed Medical Officer Class I, South Pacific Health Service, with effect from 1st November, 1965 and posted to Fiji.

Dr. R. R. B. Baxendine was appointed Medical and Health Officer, South Pacific Health Service, with effect from 18th November, 1965 and posted to Nadi Airport, Fiji.

Dr. Dharam Singh was appointed Medical Officer Class I, Fiji, with effect from 27th October, 1965.

(d) Transfers and Secondment to and from within the Region -

Dr. R. A. Franklin was transferred to Fiji from the Gilbert and Ellice Islands Colony with effect from 26th December, 1964.

Dr. P. B. Thompson was seconded to the Cook Islands Administration with effect from 23rd September, 1964.

Dr. M. Sorokin was transferred to Fiji from the Western Pacific High Commission with effect from 17th August, 1965.

Dr. S. M. Bass was seconded to the Gilbert and Ellice Islands Colony with effect from 29th March, 1965.

(e) Resigned from the Service -

Dr. B. R. Duncan resigned from the Service with effect from 21st January, 1965.

(f) Retirement from the Service -

Dr. A. R. Edmonds, Principal, Fiji School of Medicine, retired from the Service with effect from 20th June, 1964.

TABLE I.

THE POOL OF MEDICAL OFFICERS.

Medical Establishment as at 31st December, 1965.

	Fiji	Western Samoa	Cook Islands	Niue Island	British Solomon Islands Protectorate	Gilbert and Ellice Islands Colony	Tonga	New Hebrides	Total
Inspector-General/Director of Medical Services	1	-	-	-	-	-	-	-	1
Director of Medical Services	-	1‡	-	-	1	-	-	-	2
Deputy Director of Medical Services	1	-	-	-	-	-	-	-	1
Assistant Director of Medical Services	1	-	-	-	-	-	-	-	1
Physician Specialists	1	-	-	-	-	-	-	-	1
Surgeon Specialists	2	1	-	-	-	-	-	-	3
Surgeon	1	-	-	-	-	-	-	-	1
Gynaecologist/Obstetrician	1	-	-	-	-	-	-	-	1
Pathologist	1	-	-	-	-	-	-	-	1
Ophthalmologist	1	-	-	-	-	-	-	-	1
Radiologist	1	-	-	-	-	-	-	-	1
Anaesthetist	1	-	-	-	-	-	-	-	1
Chief Medical Officer	4	-	2	1	-	1	1	1	10
Senior Health Officer									
Senior Medical Officer	18	2	1	-	5	2	-	1	29
Medical Officers + Makogai	1	-	-	-	-	-	-	-	1
Principal, Fiji School of Medicine	1	-	-	-	-	-	-	-	1
Assistant Principal, Fiji School of Medicine	1	-	-	-	-	-	-	-	1
Lecturer in Social and Preventive Medicine, Fiji School of Medicine	1	-	-	-	-	-	-	-	1
Total	38	5	3	1	6	3	1	2	59

‡ Director of Health.
+ The figures refer to University Graduates only.

NURSING STAFF.

The Agreement provides that New Zealand should maintain a pool of nurses for secondment to participating territories. This provision however is being used less and less as territories introduce their own nursing training programmes and/or send their own nationals overseas for training.

In place of nurses coming from New Zealand to nurse in the islands, more young women are going from the islands to New Zealand for nursing training and more particularly for post-graduate training.

Post-graduate courses are provided in New Zealand for island nurses and for nurses with a full professional qualification.

V. TRAINING OF STAFF.

The Fiji School of Medicine not only provides courses and issues diplomas in Medicine and Surgery, and Dental Surgery; but also issues certificates in a number of Auxiliary Medical subjects (Dietetics, Laboratory Technology, Pharmacy, Physiotherapy, Radiography and Health Inspection).

(1) TRAINING IN MEDICINE

Medical training in Fiji commenced in 1886 with a three-year course in medicine for Fijians. The first certificate of qualification was issued in November 1888. The School was known originally as the Suva Medical School, but stimulated and assisted by the Rockefeller Foundation, was enlarged in 1928 to accept students from other island territories of the South Pacific, and was re-named the Central Medical School. At this time the course was extended to four years, and in 1952 the first students were enrolled for the present five-year course. In 1953, the new Fiji School of Medicine building at Tamavua was opened by Her Majesty The Queen. The original course of 1886 has been so extended and broadened that graduates of the School form a body of highly trained medical men, who are considered competent to undertake most, if not all, the responsibilities of University graduates in the medical field. For Fiji graduates, a post-graduate year of internship in a major hospital in Fiji is compulsory.

A number of students coming from territories outside Fiji are required to undertake a one of two-year "Preliminary Course" in basic subjects of general education (English, Mathematics and General Science), before entering the medical course proper. The first year of the medical course covers the basic pre-medical subjects (Chemistry, Physics and Biology). The second year subjects are Anatomy, Physiology, Biochemistry

and Histology. The final three years are devoted to clinical subjects and the curriculum includes lectures, ward teaching and practical work. Pre-medical, pre-clinical and Social and Preventive Medicine are taught at the School at Tamavua. Clinical work is mostly undertaken at the Colonial War Memorial Hospital, Suva, but students also attend the Tamavua Tuberculosis Hospital, St. Giles' Hospital for mental diseases in Suva and other medical units in and around Suva. Most of the clinical teaching is done, part-time, by the Specialists and members of their units at the various institutions. The Colonial War Memorial Hospital in Suva is the main teaching hospital for the Fiji School of Medicine.

The full-time staff of the School consists of (1965):-

Principal and Histology -

K. J. Gilchrist, M.B., B.S.(Lond.), L.R.C.P.(Lond.)
F.R.C.S.(Eng.), O.St.J.

Anatomy -

K. J. Gilchrist

A. Konusi, D.S.M.(Fiji).

Biology -

U. C. Srinivasan, M.Sc.(Bombay), B.Ed.(Delhi).

Chemistry -

B. Jain, M.Sc.(Lucknow), A.R.I.C.(Lond.).

Dentistry -

D. Narayan, D.S.D.(Fiji), B.D.Sc.(Q'land.), D.P.H.(Syd.)

R. J. Southall, B.D.S.(B'ham).

English -

E. M. Williams, B.A., B.Ed., M.B., B.S.(Melb.).

K. H. Subramoniam, M.Sc.(Nagpur).

Hygiene -

R. L. Miller, M.R.S.H.

C. Prasad, M.R.S.H.

Medicine -

Vacant.

Physics -

P. C. Jain, M.Sc.(Lucknow).

M. L. Vithal, B.Sc.(N.Z.).

Physiology -

M. Sorokin, M.B., B.Ch.(Rand.), M.R.C.P.(Edin.).

Social and Preventive Medicine -

T. G. Hawley, M.B., Ch.B.(N.Z.), D.P.H.(Eng.).

A. K. Manulevu, M.B.E., D.S.M.(Fiji), M.R.S.H.

Surgery -

M. E. J. Hackett, M.B., B.S.(Lond.), F.R.C.S.(Eng.).

Heads of Departments responsible for part-time clinical teaching over the two years reviewed were:-

Medicine -

J. T. Cassidy, M.D., M.B., B.Ch., B.A.O., C.P.H.(Dublin),
F.R.C.P.I.

Surgery -

J.L.M. de Beaux, F.R.C.S., D.T.M. & H.(Liverpool),
M.B., B.S.(Madras).

Obstetrics/Gynaecology -

D. J. Lancaster, M.B., B.S., M.R.C.O.G.

Pathology -

W. G. MacIntosh, M.B., Ch.B.(Glasgow).

Tuberculosis -

G. D. Murphy, M.B., B.Ch., B.A.O.(Q.U.Belfast), D.T.C.D.
(Wales).

Leprosy -

D. W. Beckett, M.A., M.D., M.B., B.Ch., B.A.O.(Dublin),
D.T.M.& H.(Eng.).

Anaesthetics -

L. A. Phillips, M.B., B.S.(Lond.), D.A.(Eng.).

Paediatrics -

G. Rutledge, M.B., B.Ch., B.A.O.(Q.U.Belfast), D.C.H.
(Lond.), M.R.C.P.(G).

Psychiatry -

D. F. Macgregor, M.A., B.M., B.Ch., B.Sc.(Oxon.),
D.P.M.(Lond.).

The terms and conditions of service and nomenclature of graduates of the School vary to some extent from territory to territory, but in recent years there has been a noticeable movement towards the achievement of uniformity. In Fiji, the graduate is known as a Medical Officer. He is required by law to undertake one year internship at one of the main hospitals after graduation, and is only permitted to practise medicine and surgery while in Government Service. He is not permitted to engage in private practice. In other territories there are variations of title such as Samoan Medical Practitioner and Tongan Medical Practitioner, and although in no territory is private practice permitted, some territories do allow non-Government practice with a mission or private estate.

In 1959, the Nuffield Department of Social and Preventive Medicine was opened. This Department was built, equipped and operated for three years on a grant from the Nuffield Foundation. This unit incorporates an out-patient clinic which is used for the training of students in the conduct of a general practice clinic similar to the many such clinics operated throughout the island territories. Another dispensary at Nabua, four miles away, is under the control of School staff and is also used for teaching purposes. A strong emphasis is placed on the teaching of Social and Preventive Medicine, during the third, fourth and fifth years. In the final year, the students participate in an environmental and medical survey of a selected area or section of the population.

(2) POST-GRADUATE TRAINING

A post-graduate course for Medical Officers from Fiji and overseas is given annually leading to the Certificate of Public Health. Other post-graduate courses in various subjects are arranged by the School, as are general refresher courses. The courses are conducted by the Specialists and staffs of the various hospital units.

(3) TRAINING IN DENTISTRY

Dental students were first admitted in 1943, and the first graduation was held in 1945. The course was originally of three years duration, was then increased to four years, but has since reverted to three years, with an additional post-graduate fourth year in Prosthetics if required. The first year

covers basic sciences and some dental subjects; the second year Anatomy, Physiology and Dental subjects; the third year purely clinical and preventive dentistry.

Teaching staff consists of the Senior Dental Officer, three full-time Dental Officers two of which are on School staff, and one local graduate Dental Officer.

(4) TRAINING OF AUXILIARY PERSONNEL

A number of courses in Auxiliary Medical subjects are controlled by the School, which has for the last two years been responsible for all auxiliary students from Fiji and overseas, and for organisation and curricula of these courses. The courses are:-

i. Sanitation -

This is carried out at the Nuffield Department of Hygiene, which is an integral part of the School. A new building was erected in 1961 from funds provided from the Nuffield grant, and has subsequently been enlarged. Two courses are provided:-

- (a) A year of theory at the School, leading to a Certificate in Health Inspection (Theory); this is followed by a second year of field training, at the end of which the student is eligible for employment as Assistant Health Inspector.
- (b) A two-year course for specially selected candidates which are usually drawn from the ranks of the Assistant Health Inspectors, preparing them for examination for the Diploma in Public Health Inspection for General Overseas Appointments of the Royal Society for the Promotion of Health. The examinations are conducted by the Society.

ii. Laboratory Technology (Medical) -

This course is of three years duration, and training is undertaken mainly at the Central Laboratory, Suva, under the direction of the Pathologist. Students also attend science lectures at the School.

iii. Pharmacy -

This course has, to date, commenced on alternate years. It is a three year course, training being done at the School (sciences and mathematics as required), at the Central Government Pharmacy (theory and practice) and at the Pharmacy of Colonial War Memorial Hospital (practical). On receipt of a Certificate of competency in Pharmacy, the trainee is eligible for employment as Junior Pharmacist.

iv. Radiography -

This course is currently of three years and three months, and leads to a Certificate of competency in Radiography. Training is carried out at the School (Physics, Mathematics, Anatomy) and in the X-Ray Department of the Colonial War Memorial Hospital under the direction of the Radiologist.

v. Dietetics -

This is a three year course for girls in house-keeping and dietetics leading to a Certificate of dietetics. Training is carried out at the School (first year - Biology, Chemistry, English; second year - Physiology), in the Nutrition Section of the South Pacific Health Service, and in hospital and other institutional establishments.

vi. Physiotherapy -

A three year course for girls. This course has grown considerably in the last two years and is in the charge of a full-time Physiotherapy Tutor. Lectures are divided between the School and the Colonial War Memorial Hospital. Practical instruction and experience being provided at the Physiotherapy Department of the latter. The course leads to a Certificate in Physiotherapy.

vii. Dental Hygienists, Dental Nurses and a very limited number of Dental Mechanics are trained by the Dental Department.

(5) MEDICAL REFERENCE LIBRARY

The Library is divided into two parts. Books on clinical subjects are kept at the Colonial War Memorial and Lautoka Hospitals whilst those on pre-clinical subjects are retained in the main library which is housed in the main school building.

An increase in the number of overseas scholarships made available for post-graduate medical education is again recorded. The Auckland Hospital Board and various States in Australia allow the temporary registration of Fiji graduates thus allowing them to carry out clinical duties in hospitals. Post-graduate training has been provided in Obstetrics, Public Health, Child Health, Nutrition, Paediatrics and Child Health, Reconstructive Surgery. Scholarships have also been granted for some Auxiliary students such as Physiotherapy. These have been sponsored by the World Health Organization in addition to Fiji Government.

(6) GENERAL

The number of students enrolled at the School continues to rise. Relief of accommodation problems is now in view with a new hostel, already under construction at the Colonial War Memorial Hospital and is due for completion before the end of 1966. This building will also increase lecture-room space for medical and dental courses, and will include a new students' library.

Weekly medical broadcasts to Medical Officers continued through 1964 and 1965, but are to be suspended at the end of 1965 because of lack of support. It is intended to replace these broadcasts by a monthly newspaper to be produced by the School in 1966.

Nuffield scholars were again accepted, two in 1964 and two in 1965, for periods of three months. One scholar each year came from the University of Aberdeen, and the other from the University of Newcastle-upon-Tyne. This arrangement appears to have become a permanent fixture in the School's calendar.

The annual Seminar of the Medical Officers' Association was held at the School in 1964 and 1965.

The following tables are attached.

- | | |
|-----------|--|
| Table II | The number of students enrolled from each territory at the beginning of 1964 and 1965. |
| Table III | Total enrolments 1956-1965. |
| Table IV | Medical graduates (by Territory) 1956-1965. |
| Table V | Dental graduates (by territory) 1956-1965. |
| Table VI | Auxiliary qualifications 1956-1965 by year. |

NUMBER OF STUDENTS FROM EACH TERRITORY AT THE BEGINNING OF THE ACADEMIC YEARS 1964-1965.

TABLE II.

Administration	Inter-mediate	M E D I C A L										Dental All Years.		Pharmacy.		Asst. Health Inspector.		Health Inspector.		X-Ray		Dietitian		Physio-therapy		Agriculture.		Laboratory.		Dental Mecha-nic.		Post-graduate.		Totals.	
		I	II	III	IV	V	64	65	64	65	64	65	64	65	64	65	64	65	64	65	64	65	64	65	64	65	64	65	64	65	64	65			
British Solomon Is. Protectorate.	2	6	1	-	-	1	-	-	-	2	1	1	1	-	-	1	2	-	-	-	-	-	-	-	-	-	-	-	1	1	10	12			
British Honduras.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1			
Cook Islands.	1	-	1	1	-	1	-	-	-	1	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5	5			
Dutch New Guinea (now Fiji).	-	-	-	-	-	-	-	-	1	-	-	3	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4	3				
Gilbert & Ellice Islands Colony.	6	5	2	2	-	9	-	5	3	-	5	3	1	-	-	1	3	3	6	5	1	4	8	4	9	12	17	7	1	1	14	16			
Fiji.	-	-	12	11	-	-	-	-	1	-	-	1	1	-	8	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	1	96			
Fr. New Hebrides.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4	4			
Nine Islands.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1			
Nauru.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	8	6			
New Hebrides.	4	3	1	-	-	-	-	-	2	1	1	2	-	1	2	-	-	2	-	-	-	-	-	-	-	-	-	1	-	-	9	7			
Papua/New Guinea.	-	-	-	-	-	-	-	-	-	1	-	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1			
Tokelau.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1			
United States Trust Territory.	-	-	-	-	-	-	-	-	3	4	4	-	-	-	-	-	2	1	-	-	-	-	-	-	-	-	3	-	-	13	8				
Western Samoa.	2	-	1	2	-	-	-	-	-	4	-	3	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	12	18			
Tonga.	3	2	4	7	-	3	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	9	16			
T o t a l	18	16	22	23	5	16	11	3	14	11	9	15	21	22	3	1	12	11	4	7	8	8	4	10	12	17	11	12	3	2	8	169	195		

TABLE III.TOTAL ENROLMENTS 1956-1965.

Course	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965
Medical	86	92	90	89	81	75	81	79	71	76
Dental	16	14	6	6	10	17	22	23	25	26
Pharmacy	4	2	4	3	5	4	5	1	3	3
Assistant Health Inspector	14	11	16	26	16	5	14	8	13	11
Health Inspector	-	-	-	-	-	5	5	-	4	7
X-Ray	1	1	-	2	3	4	5	6	10	9
Dietetics	2	3	1	2	3	6	7	4	4	8
Physiotherapy	-	-	-	-	3	3	3	2	4	10
Agriculture 1st Year	-	-	-	-	-	-	11	12	12	17
Laboratory	6	4	6	7	8	9	12	12	12	14
Dental Mechanic	-	-	-	-	-	-	-	-	3	2
Post-graduate	-	-	-	-	12	9	7	7	8	12
T o t a l	129	127	123	135	141	137	172	154	169	195

TABLE IV.

MEDICAL GRADUATES BY TERRITORY AND YEAR 1956-1965.

Administration	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	Total
Fiji	10	4	7	8	7	5	4	3	-	2	50
Western Samoa	1	-	-	-	-	-	-	-	-	2	3
Cook Islands	1	-	1	-	-	-	-	-	1	-	3
Gilbert & Ellice Islands Colony	-	-	-	-	1	3	-	2	-	3	9
United States Trust Terri- tory	-	-	1	-	-	-	1	1	4	3	10
British Solomon Islands Protectorate	2	1	1	-	-	-	-	-	2	1	7
Tonga	1	-	-	-	-	-	-	-	-	-	1
Nauru	-	1	-	1	-	-	-	-	-	1	3
Niue	-	2	-	-	-	-	1	-	-	-	3
New Hebrides	-	-	-	-	-	-	2	-	-	-	2
Tokelau	-	-	-	-	-	-	-	1	1	-	2
American Samoa	-	1	-	-	-	1	2	-	-	-	4
Papua/New Guinea	-	-	2	-	2	1	3	-	-	2	10
T o t a l	15	9	12	9	10	10	13	7	8	14	107

TABLE V.

DENTAL GRADUATES BY TERRITORY AND YEAR 1956 - 1965.

Administration	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	Total
Fiji	5	2	1	1	-	-	4	1	6	-	20
Western Samoa	-	-	-	-	-	-	-	1	-	-	1
Cook Islands	-	-	-	1	-	-	1	-	-	1	3
Gilbert and Ellice Islands Colony	-	-	-	-	-	-	-	-	-	-	-
United States Trust Territory	-	-	-	-	-	-	-	-	-	-	-
Papua/New Guinea	-	-	-	-	-	-	-	2	-	2	4
American Samoa	-	-	-	-	-	-	-	-	-	-	-
British Solomon Islands Protectorate	-	-	-	-	-	-	-	-	-	-	-
Tonga	1	1	-	1	-	-	-	-	-	-	3
Nauru	-	-	-	-	-	-	-	-	-	-	-
Niue	-	-	-	-	-	-	-	-	-	-	-
New Hebrides	-	-	-	-	-	-	-	-	-	-	-
Tokelau	-	-	-	-	-	-	-	-	-	-	-
British Honduras	-	-	-	-	-	-	-	1	-	-	1
Total:	6	3	1	3	-	-	5	5	6	3	32

TABLE VI.

AUXILIARY GRADUATES 1956-1965.

Course	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	Total
Pharmacy	1	-	2	-	2	2	4	-	1	-	12
Assistant Health Inspector	15	10	13	-	16	10	11	4	12	9	100
Health Inspector	-	-	-	-	-	-	4	1	-	5	10
X-Ray	-	1	1	-	-	2	1	2	1	4	12
Dietetics	-	-	2	1	-	-	2	1	1	-	7
Physiotherapy	-	-	-	-	-	-	-	2	-	-	2
Laboratory	2	2	-	3	1	2	2	4	3	5	24
T o t a l	18	13	18	4	19	16	24	14	18	23	167

(7) TRAINING OF NURSES

Nurse training is carried out in the British Solomon Islands Protectorate, the Cook Islands, Fiji, the Gilbert and Ellice Islands, Niue, the New Hebrides, the Kingdom of Tonga, and Western Samoa. The training of medical assistants is carried out in the British Solomon Islands Protectorate and the New Hebrides.

The standard of training in the various territories is roughly the same and approximates to that carried out in Fiji according to the local curriculum. However the Central Nursing School in Suva also provides a course at the New Zealand standard and students take the New Zealand examinations.

Fiji also provides two post-graduate nursing courses, one in midwifery where selected candidates are prepared to take the New Zealand qualification and the other in Public Health Nursing which provides training tailored to suit local conditions.

VI. LEPROSY.

The Fiji Government established a Leprosarium on the island of Makogai in 1911.

For many years this Leprosarium also acted as a Central Leprosarium for other participating territories.

However with the advent of specific therapy for leprosy in 1948 the need for centralisation no longer existed so that the territories have gradually repatriated their patients and set up their own leprosy services.

The number of cases being treated at Makogai at the end of 1965 was 166 made up as follows:-

Fijians	89
Indians	56
Europeans and Part-Europeans	7
Polynesians and Others	14
Rotumans	4
Banabans	2
Chinese	2
Tongans	4
Samoans	-
Cook Islander	1
Solomon Islander.. .. .	1
	<hr/>
	166
	<hr/>

The considerable reduction of the number of in-patients at Makogai demanded the reappraisal of leprosy policy. Plans for a new Leprosy Hospital in Suva are therefore in preparation. The new hospital will provide for the treatment of infectious leprosy, the care of people incapacitated by leprosy, and the surgical treatment of deformities and will also provide for rehabilitation of people so affected.

In the British Solomon Islands Protectorate, treatment is carried out at the Tetere Government Leprosarium (nursing and care here is also undertaken by the Sisters of the Society of Mary), the Melanesian Mission Leprosarium at Fauabu, Methodist Mission at Ozama, the Roman Catholic Mission at Buma, and the Seventh Day Adventist Missions at Kukudu and Kwalibisi. In the Gilbert and Ellice Islands Colony, the Leprosarium is adjacent

to the main general hospital at Bikenibeu. The Leprosarium at Apia, Western Samoa, forms an integral part of the main hospital. In the Cook Islands the colony at Aitutaki was closed down in 1960, all patients having negative smears.

The continuation of generous help by the New Zealand Lepers' Trust Board is gratefully acknowledged. This help, which is distributed widely in the island territories of the South and Western Pacific Islands, has in certain circumstances also been extended to the provision of funds for hospitals and medical ships.

The Fiji Lepers' Trust Board administers an annual allocation provided by the parent body in New Zealand.

The present Chairman, Mr. H. Maurice Scott, C.B.E., D.F.C., is the son of Sir Henry Scott, Q.C., who was Chairman of the Fiji Board from January, 1944, to June 1956. (The Secretary to the Board is Mr. W. E. Donovan, O.B.E., I.S.O., K.S.G., O.St.J.).

The allocations to the Fiji Trust Board during 1964 and 1965 were £8,817 for each of the two years. Contributions to Missions and Government Leprosaria in other territories during 1965 included:-

				£	£
<u>Fiji:</u>					
Korovou rehabilitation				5,000	
Makogai				3,000	
Makogai re-building				<u>5,000</u>	13,000
<u>New Hebrides:</u>					
Presbyterian Mission				6,000	
Anglican Mission				4,000	
Catholic Mission				4,000	
Churches of Christ, Aoba				1,000	
British Ante-Natal Clinics				<u>1,000</u>	16,000
<u>British Solomons:</u>					
Anglican Mission				4,000	
Catholic Mission				4,000	
Methodist Mission.. .. .				4,000	
Carried forward ..				<u>12,000</u>	<u>29,000</u>

£ £

Brought forward .. 12,000 29,000

Tetere Leprosarium 1,000

Native Councils 500

Seventh Day Adventists 1,500 15,000Bougainville:

Catholic Mission 4,000

Methodist Mission.. .. 4,000 8,000New Hospital Facilities - Solomons:

Anglican Mission 4,500

Catholic Mission 4,000

Methodist Mission.. .. 4,500 13,000Leper Relief Vessels:

Anglican (M.L. Fauabu Twomey).. .. 2,500

Catholic (M.L. Mala Twomey) 2,500

Methodist (M.L. Ozama Twomey).. .. 2,500 7,500Medical Education:

(Twomey Scholars).. .. 5,000

Sundry Allocations:

Tahiti Leprosarium 500

South Seas Evangelical Mission .. 500

New Caledonia Ducos Leprosarium .. 500

Tonga.. .. 1,000

Samoa.. .. 500 3,00080,500

VII. EPIDEMIOLOGY.EPIDEMIOLOGICAL SERVICE.

The South Pacific Health Service also runs an Epidemiological Information Service from its Headquarters in Suva. Since 1949, the South Pacific Commission has given financial assistance to the Service to enable it to embrace not only the participating territories of the South Pacific Health Service but in addition the other territories covered by the Commission.

The procedure adopted is as follows:-

The notifiable diseases are divided into two categories - Category A and Category B. Category A diseases are the formidable epidemic diseases set out in the International Sanitary Regulations (World Health Organization), i.e. Cholera, Plague, Smallpox, Typhus (Louse-borne), Yellow Fever, Relapsing Fever (Louse-borne). If a case of one of these diseases is diagnosed, the outbreak is notified by telegram direct to:-

- (1) The World Health Organization Epidemiological Bureau, Singapore, and
- (2) The South Pacific Health Service Headquarters, Suva, Fiji (PACIMED).

Category B diseases are -

Acute anterior Poliomyelitis.

Cerebro-Spinal Meningitis.

Diphtheria.

Bacillary Dysentery (Shigellosis).

Encephalitis (Specify).

Influenza.

Measles (Rubeola).

Typhoid.

Pertussis.

Typhus (Flea-borne).

Typhus (Mite-borne).

Six-monthly returns of infectious diseases are compiled and circulated to the territories. Outbreaks of the major epidemic diseases in the territories are notified to the South Pacific Health Service Headquarters by telegram together with the

essential details followed by weekly progress reports. The other territories are kept informed of these outbreaks and subsequent developments.

Consolidated returns of communicable diseases notified for the years 1964 and 1965 are contained in Appendices I and II.

VIII. NUTRITION.

Reports of the activities of the Nutrition Section during the period under review are contained in an Appendix to this report.

IX. ACTIVITIES OF INTERNATIONAL AND OTHER ORGANISATIONS IN THE AREA.

One of the most significant developments in the period under review was the opening in Suva in 1965 of an Area Representative's office of the World Health Organization.

The opening of the office indicates the importance and interest placed in the area by the World Health Organization which has current projects of assistance to most territories of the area. These include :-

British Solomon Islands Protectorate - Malaria Control, Nurse Education and Maternal and Child Health.

New Hebrides - Tuberculosis Control and Maternal and Child Health.

Fiji - Assistance to Maternal and Child Health, Tuberculosis Control and Water Supplies.

Gilbert and Ellice Islands Colony - Nurse Education and Maternal and Child Health.

Western Samoa - Filaria Control and Tuberculosis Control and Maternal and Child Health.

Tonga - Water Supplies, Maternal and Child Health and Typhoid Fever Control.

The technical assistance rendered by the World Health Organization and the supplies provided by the United Nations Children's Fund are greatly appreciated by the member governments, and every opportunity is taken to work closely with the Area Representative in improving conditions in the area.

The assistance of the Government of the United States in providing large quantities of surplus food supplies and in particular skim milk powder to several territories is gratefully recorded as is the assistance given to the area by the South Pacific Commission, the Famine Relief, and many other international agencies.

C.H. GURD,

Inspector-General,
South Pacific Health Service.

Suva, Fiji.

APPENDIX I.

SOUTH PACIFIC HEALTH SERVICE.

CONSOLIDATED RETURN OF COMMUNICABLE DISEASES NOTIFIED FOR THE YEAR 1964.

Name of Disease	British Solomon Islands Protectorate.	Cook Islands.	Fiji *	Gilbert and Ellice Islands Colony.	Guam.	Nauru Island.	New Hebrides.	Niue Island.	New Caledonia.	Tahiti.	Papua - New Guinea.	Eastern Samoa.	Western Samoa.	Hawaii.	Tonga.	United States Pacific Islands Trust Territory.	Total.
A	Cholera .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Plague .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Relapsing Fever (Louse)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Smallpox .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Typhus (Louse) ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B	Yellow Fever ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Cerebro-Spinal Meningitis ..	..	..	26	1	3	..	6	2	..	421	20	12	8	11	..	512
	Diphtheria	767	1,566	123	607	3	63	..	10	26	20	..	4	287	..	..	21
	Dysentery Bacillary ..	..	..	6	..	..	..	..	..	..	928	..	..	..	2	..	4,384
	Encephalitis	929	5,440	915	7,838	39	701	2,662	217	446	113	..	1,040	7	11,963	26,892	120,472
	Influenza	1,724	297	893	17	67	722	360	695	327	1,122	..	109	928	3,059	25	9,996
	Measles .. ..	..	..	..	..	..	..	..	1	..	631	..	2	7	1	64	5,438
	Pertussis .. ..	..	..	..	..	..	..	..	..	..	13	..	..	..	1	..	16
	Poliomylitis .. ..	..	53	..	..	..	..	..	12	17	15	..	19	..	199	..	315
	Typhoid Fever ..	..	..	..	..	..	..	..	..	..	1	..	..	1	..	..	2
	Typhus (Flea) ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Typhus (Mite) ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1

* Meningitis all types except Tuberculosis.

APPENDIX II.

SOUTH PACIFIC HEALTH SERVICE.

CONSOLIDATED RETURN OF COMMUNICABLE DISEASES NOTIFIED FOR THE YEAR 1965.

Name of Disease	British Solomon Islands Protectorate.	Cook Islands.	Fiji *	Gilbert and Ellice Islands Colony.	Guam.	Nauru Island.	New Hebrides.	Niue Island.	New Caledonia.	Tahiti.	Papua - New Guinea.	Eastern Samoa.	Western Samoa.	Hawaii.	Tonga.	United States Pacific Islands Trust Territory.	Total.
A	Cholera .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Plague .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Relapsing Fever (Louse)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Smallpox.. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Typhus (Louse)..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Yellow Fever ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B	Cerebro-Spinal Meningitis .. ..	..	1	30	1	7	..	1	..	2	372	2	7	6	10	1	441
	Diphtheria .. ..	..	1	1	..	..	..	..	1	..	6	..	..	..	..	..	8
	Dysentery Bacillary ..	164	511	210	247	2	15	..	6	101	677	..	4	265	..	..	2,202
	Encephalitis	5	..	2	..	..	..	1	..	..	54	..	..	8	3	..	73
	Influenza	4,607	12,688	33,467	17,971	7	668	2,924	419	330	5,664	..	1,695	1,242	14,920	1,623	98,225
	Measles	724	275	34	3,217	160	6	799	6	951	710	..	385	4,044	3,911	3,710	18,549
	Pertussis .. ..	..	..	189	..	..	..	..	273	..	435	..	..	2	..	232	1,516
	Poliomyelitis .. ..	..	..	..	..	..	..	..	..	2	46	..	4	..	239	..	52
	Typhoid Fever .. ..	..	..	..	..	..	..	..	2	16	8	..	..	1	..	..	309
	Typhus (Flea) .. ..	..	..	..	..	..	..	..	..	..	5	..	..	..	..	..	5
	Typhus (Mite) .. ..	..	..	32	..	..	..	..	..	525	47	..	..	..	..	..	605
	Dengue Fever .. ..	..	..	304	7	..	..	113	116	73	395	3	70	89	..	7	1,188
	Infective Hepatitis ..	5	1	..	..	5	..	..	..	..	..	..	..	..	..	..	..

* Meningitis all types except Tuberculosis.

APPENDIX III.DISTRIBUTION OF EPIDEMIOLOGICAL INFORMATION
DISTRIBUTION LIST.

Ministry of Health, London.
 Director-General of Health, Canberra, Australia.
 Department of Health, Sydney, Australia.
 Director-General of Health, Wellington, New Zealand.
 World Health Organization, Geneva, Switzerland.
 World Health Organization, Manila, Philippines.
 World Health Organization, Singapore.
 South Pacific Commission, Noumea, New Caledonia.
 U.S. Quarantine Medical Officer, Honolulu.
 Director of Public Health, Guam.
 The Public Health Officer, HICOMTERPACIS, Guam.
 Epidemiologist, State of Hawaii, Department of Health,
 Honolulu, Hawaii.
 The British Resident Commissioner, Vila, New Hebrides.
 Medical Director, Pan American Airways, San Francisco.
 American Embassy, Wellington, New Zealand.
 American Consul, Noumea, New Caledonia.
 Consul-General, Papeete, Tahiti.
 Director of Medical Services, Air Department, Wellington,
 New Zealand.
 Divisional Medical Officer, Central, Suva.
 Divisional Medical Officer, Western, Lautoka.
 Medical Officer-in-Charge, South Pacific Sugar Mills Ltd.,
 Lautoka.
 Medical Officer, Nadi Airport, Fiji.
 Chief Medical Officer, Nuku'alofa, Tonga.
 Director of Health, Apia, Western Samoa.
 Secretary to Government, Apia, Western Samoa.
 Director of Medical Services, Honiara, British Solomon
 Islands Protectorate.
 Chief Medical Officer, Tarawa, Gilbert and Ellice Islands
 Colony.

British Senior Medical Officer, Vila, New Hebrides.
 Director of Health, Tutuila, American Samoa.
 Chief Medical Officer, Rarotonga, Cook Islands.
 Director of Medical Services, Papeete, Tahiti.
 Chief Medical Officer, Nauru.
 Director of Health, Port Moresby, Papua-New Guinea.
 Director of Medical Services, Noumea, New Caledonia.
 Chief Medical Officer, Niue Island.
 Notifications Office, International Quarantine Service,
 World Health Organization, Geneva, Switzerland.
 The World Health Organization Area Representative, Suva.
 The Section of Endemo-Epidemic Diseases, Division of
 Communicable Disease Services, World Health
 Organization, Geneva, Switzerland.

APPENDIX IV.NUTRITION REPORT 1964-1965.Staff:

There was no change in staff during the period under review. Miss S. L. Gourley, Home Science Extension Officer and Miss R. M. Wilkins, Nutritionist were assisted part-time by Mrs. S. V. Parkinson.

NUTRITION AND HOME SCIENCE EDUCATIONLectures to Students:

Lectures in Nutrition and dietetics were given to medical, nursing, assistant dietitian and health inspector students in Fiji. Lectures in nutrition were also given to nurses in Western Samoa and to nurses and teacher trainees in Niue during visits to these territories.

Lectures in nutrition, dress making and elementary science were given at the South Pacific Commission Training Centre in Fiji, and on the relation between nutrition and dental health at a World Health Organization Dental Epidemiological Survey Course.

Village Work:

Talks and demonstrations in nutrition were given as part of Health Education Courses organized by the Fiji Medical Department.

Series of Courses on "Better Kitchens" were carried out in Fiji in conjunction with the Women's Interest Office and the South Pacific Commission Training Centre and in the British Solomon Islands Protectorate in conjunction with the Education Department.

Talks and demonstrations in cookery and nutrition were given to Women's Club in Niue and Western Samoa during visits to these territories.

Nutrition and Home Science Propaganda:

The Nutrition Section prepared exhibitions on School Meals and Kitchens at the 1964 Fiji Show. A series of simple radio talks on Infant Feeding were prepared and sent to all South Pacific Health Service Territories. Radio talks on cookery were given on the Women's Programme, and talks on simple nutrition prepared for translation and broadcasting by the Fiji Broadcasting Commission.

PUBLICATIONS.Visual Aids:

The three food group chart was designed and printed for use as a poster or for a flannelgraph. Flip charts with teaching notes attached were designed for teaching at village level. Flip charts were prepared on Infant Feeding, Dental Health and Family Planning.

Books:

A Manual of Nutrition was printed and the South Pacific Cookery Book reprinted. Both of these have proved extremely popular throughout the South Pacific and it is planned to reprint both during 1966.

A Manual of Dietetics was prepared for use in teaching dietetics and in planning and preparing therapeutic diets.

Further manuals are being prepared on Infant Feeding and Mothercraft, and a handbook on Vegetable Gardening for Subsistence Farmers.

Various teaching notes and recipe booklets and leaflets were prepared.

RESEARCH.

A series of experiments were conducted in conjunction with the Department of Agriculture of Fiji to determine the ascorbic acid content of local root vegetables and the loss of the vitamin during preparation and cooking.

In May 1964 a nutrition survey was carried out among Indian families at Rakiraki, Fiji, to provide information on the diet of the Indian people in Fiji. This followed a similar survey in a Fijian village carried out in 1963.

In August and September 1964 a nutrition survey was carried out in rural and urban areas of Western Samoa.

Investigations have also been carried out into the food imports of Western Samoa and the nutrition of school children and preschool children in Niue Island.

The freeze drying apparatus and vacuum pump has been received and will be installed in the new Nutrition unit now under construction in Suva.

ADVISORY SERVICE.

The Nutrition Section has continued to answer nutritional queries and to advise on ration scales for long term economic planning, during flood and hurricane relief and for schools and institutions when requested.

SCHOOL FEEDING.

Staff reports on field trips in the South Pacific Health Service territories indicate the need for improving the feeding arrangements in rural schools, hospitals, and similar institutions. The Nutrition Section has prepared cyclostyled notes on school lunch schemes for day schools and has initiated school lunch schemes in Niue Island and parts of Fiji.

Future plans include a training course in the principles of simple nutrition, dietetics and catering for boarding schools, rural hospitals and similar institutions. It is also planned to build a model institutional kitchen of local materials. This would be equipped with a chula stove, food boilers and other simple equipment.

APPENDIX V.AGREEMENT FOR THE CONTINUED OPERATION OF A
SOUTH PACIFIC HEALTH SERVICE.

WHEREAS on 10 January 1958 an Agreement for the continued operation of a South Pacific Health Service was entered into by the Government of Fiji, the Western Pacific High Commission, acting for and on behalf of the Gilbert and Ellice Islands Colony and the British Solomon Islands Protectorate, the Government of New Zealand acting in respect of New Zealand's Island Territories, the Government of Tonga and the Government of Western Samoa.

AND WHEREAS the said Agreement, in accordance with section taken pursuant to Article 14 thereof, is due to terminate on 31 December 1964.

AND WHEREAS it is now desired to make provision for the continued operation of the South Pacific Health Service in accordance with the provisions contained in the present Agreement.

AND WHEREAS the Government of Fiji, the Western Pacific High Commission and the Government of Tonga are authorised to conclude the present Agreement by the Government of the United Kingdom of Great Britain and Northern Ireland.

NOW THEREFORE the Government of Fiji, the Western Pacific High Commission, the Government of New Zealand, the Government of Tonga, and the Government of Western Samoa (hereinafter referred to as "the Participating Administrations") agree as follows:

1. The South Pacific Health Service shall extend and apply to the Territories named in the Appendix hereto, and may, by agreement between the Participating Administrations, be extended and applied to other Pacific Island Territories.

2. The South Pacific Board of Health, established pursuant to the said Agreement of 10 January 1958 and previous Agreements (hereinafter referred to as "the Board") shall continue to supervise and control the South Pacific Health Service.

3. The Board shall consist of:

- (a) The Inspector-General, South Pacific Health Service, appointed under Article 8 of the present Agreement (hereinafter referred to as "the Inspector-General") who shall be Chairman of the Board;
- (b) The Director of Medical Services, Fiji or (whenever the same person holds office as Inspector-General and as Director of Medical Services, Fiji) a person nominated by the Governor of Fiji;
- (c) The Director-General of the Department of Health, New Zealand, or his representative;
- (d) The Director, Division of Nursing of the Department of Health, New Zealand, or her representative;
- (e) A person nominated by the High Commissioner for the Western Pacific;
- (f) A person nominated by the Premier of Tonga;
- (g) A person nominated by the Prime Minister of Western Samoa.

4. (1) Meeting of the Board shall be held at those times and places which the Board or the Chairman may from time to time determine; provided that a meeting (hereinafter referred to as "the Annual Meeting") shall be held at least once during each year as near as possible to the month of June; and provided also that at least each alternate meeting shall be held in Suva.

(2) At any meeting of the Board, four members of the Board shall constitute a quorum, provided that one of those members shall be the person appointed under sub-paragraph (e) or sub-paragraph (f) or sub-paragraph (g) of Article 3.

(3) At any meeting of the Board, the Chairman shall have a deliberative vote and, in case of equality of votes, shall also have a casting vote; and the decision of the majority of members present shall be the decision of the Board.

(4) The Board may invite observers to attend any of its meetings.

5. The headquarters of the Board shall be located in Suva.

6. The Board shall have the power to establish and maintain office premises and shall employ the clerical and other office staff which it may from time to time deem necessary.

7. The functions of the Board shall be:

- (a) to advise the Participating Administrations on all health matters within their Territories;
- (b) to collect information in regard to the incidence of disease within the Territories of the Participating Administrations, and to ensure the transmission of relevant information to the Participating Administrations;
- (c) to revise from time to time the standard code for quarantine reporting which has been drawn up by the Board for the guidance of the Participating Administrations;
- (d) to assist the Participating Administrations in maintaining adequate medical, nursing and sanitary staff;
- (e) to nominate a person or persons to act on behalf of the Board in selecting candidates for appointment to the South Pacific Health Service;
- (f) to encourage, coordinate and, if necessary, initiate medical research within the Territories of the Participating Administrations;
- (g) to advise the Participating Administrations in all matters relating to the training of Assistant Medical Officers, Nurses, Assistant Health Inspectors, Technicians and auxiliary health personnel;
- (h) to make recommendations to the Participating Administrations as regards the conditions of service, including the salary scales, of all grades of medical and health personnel;
- (i) to consider the estimates of expenditure presented to it by the Inspector-General, and to establish its annual budget;
- (j) generally to carry out those enquiries and to do all those things or acts which in the opinion of the Board are necessary for the purpose of assisting the Participating Administrations in the more effective control of disease and in the promotion of health within their Territories.

8. (1) The Inspector-General shall be a medical practitioner appointed by the Secretary of State for the Colonies in consultation with the Government of New Zealand.

(2) For the purpose of his personal service, pay and discipline, he shall be subject to the authority of the Governor of Fiji who is the representative of the Secretary of State for the Colonies.

(3) The Inspector-General shall be the chief executive officer of the Board.

9. The duties of the Inspector-General shall be:

- (a) to visit the Territories of the Participating Administrations at regular intervals and on request, at any time, and generally to keep himself personally familiar with the medical and health problems of those Territories;
- (b) subject to the general direction of the Board, to arrange for the transfer or temporary secondment of medical and health personnel to the Territories of the Participating Administrations, or upon the request of a Participating Administration for the replacement of all or any of those personnel;
- (c) to consult with the Director-General, Department of Health, New Zealand, in regard to the requirements for New Zealand nurses for secondment to the Territories of the Participating Administrations and to obtain his advice on all matters relating to the terms and conditions of service and the posting of those nurses within those Territories;
- (d) to consult with Participating Administrations concerning disciplinary action which they may from time to time consider necessary in respect of medical officers transferred or temporarily seconded to their Territories;
- (e) to obtain regular returns of infectious diseases from the Territories of the Participating Administrations together with those other reports which may from time to time be necessary, and to ensure that that information is transmitted to the Board and to all the Participating Administrations;
- (f) to establish and maintain the necessary contact with the World Health Organization and the South Pacific Commission;
- (g) from time to time to prepare those special reports on medical, health and allied problems which the Board may require or which, at his discretion, he may deem necessary;

- (h) to prepare, for the consideration of the Board at the Annual Meeting, estimates of expenditure for the following year in connection with the clerical and other office staff of the Board and with all other activities sponsored by the Board, and to submit those estimates for study by the Participating Administrations prior to the Annual Meeting;
- (i) to ensure that action taken, and recommendations made, by the Board are brought to the notice of all the Participating Administrations concerned.

10. (1) The Board may appoint an Assistant Inspector-General, South Pacific Health Service (hereinafter referred to as "the Assistant Inspector-General"). The Assistant Inspector-General shall be a medical practitioner and shall be appointed on the conditions and with the powers and duties which the Board may from time to time determine.

(2) The Inspector-General may from time to time, either generally or particularly, delegate to the Assistant Inspector-General all or any of his powers, duties and functions under Articles 9 and 12 of the present Agreement. Subject to any general or special directions given or conditions attached by the Inspector-General, the Assistant Inspector-General may exercise those powers in the same manner and with the same effect as if they had been conferred on him directly by the present Agreement and not by delegation. Every delegation under this sub-paragraph shall be revocable at will, and no such delegation shall prevent the exercise of any power by the Inspector-General. Any such delegation shall, until revoked, continue in force, notwithstanding the fact that the Inspector-General by whom it was made may have ceased to hold office and shall continue to have effect as if made by the successor in office of that Inspector-General.

11. In the discharge of their duties as such, the Inspector-General and the Assistant Inspector-General shall exercise their functions in respect of the Territories of all the Participating Administrations in equal measure, and shall not be regarded as having a special responsibility towards any one Participating Administration.

12. The present Agreement is entered into on the understanding that:

- (a) Participating Administrations will keep the Inspector-General informed of their requirements in respect of medical personnel and the Inspector-General, if so requested, will act as recruiting agent for Medical Officers and Specialist Staff. When necessity arises, the Inspector-General may transfer or second medical staff of the South Pacific Health Service from one territory to another to ensure the proper maintenance of the medical services;
- (b) The Participating Administration to whose Territories a medical officer is transferred or temporarily

seconded at any time will be responsible for the full cost involved. These costs shall include, for example, his salary, local travelling expenses, leave with pay, and pension contribution, but shall not include the expenses of the medical officer in travelling between the headquarters of the Board and the Territory of a Participating Administration. The latter expenses shall be borne in accordance with arrangements made in each case between the Board and the Participating Administration or Administrations concerned;

- (c) When any Participating Administration considers that disciplinary action is necessary in respect of medical officers transferred or temporarily seconded to its Territories, it will refer the full facts of the case to the Inspector-General for his opinion before final action is taken;
- (d) The Inspector-General will assist Participating Administrations to maintain a full complement of Nursing Sisters and other senior nursing staff and to this end will liaise closely with the Director, Division of Nursing, New Zealand. He may recruit such staff from any source which seems to him appropriate.

13. The Participating Administrations shall be responsible for the payment of the actual expenses of the Board in each year in the following proportions;

Government of Fiji	Seven-sixteenths
Western Pacific High Commission..	One-quarter
Government of Tonga.. ..	One-sixteenth
Government of Western Samoa ..	One-eighth
Government of New Zealand.. ..	One-eighth

14. (1) The present Agreement shall enter into force on the date on which all the Participating Administrations shall have signed the present Agreement; as from the date of its entry into force, the present Agreement shall supersede and replace the Agreement of 10 January 1958.

(2) After the expiration of a period of five years from the date of its entry into force, this Agreement shall be subject to review at the instance of any Participating Administration, upon notice being given to the other Participating Administrations. The Agreement shall be reviewed by the Participating Administrations during the calendar year following that in which such notice is given.

(3) Unless the Participating Administrations otherwise agree, the present Agreement shall terminate at the end of the calendar year during which the Agreement is required to be

reviewed, pursuant to the provisions of this Article.

IN WITNESS WHEREOF the representatives of the Participating Administrations have hereunto subscribed their names at the places and on the dates hereinafter mentioned

For the Government of Fiji:

F. D. JAKEWAY
Suva
7 October 1964

For the Western Pacific High Commission:

R. FOSTER
Honiara
7 November 1964

For the Government of Tonga:

TU'IPELEHAKE
Nuku'alofa
23 October 1964

For the Government of Western Samoa:

FIAME M. F.M.II
Apia
14 September 1964

For the Government of New Zealand:

KEITH HOLYOAKE
Wellington
18 August 1964

TERRITORIES TO WHICH THIS AGREEMENT APPLIES

1. Colony of Fiji
2. Western Pacific Territories -
 Gilbert and Ellice Islands Colony
 British Solomon Islands Protectorate
3. New Zealand Island Territories -
 Cook Islands (including Niue)
 Tokelau Islands
4. Kingdom of Tonga
5. Independent State of Western Samoa

